rganization ID # 0757553 Commonwealth of Kentucky ate of origin KY ling fee \$130.00 Alison Lundergan Grimes, Secretary of St			0757553.06 amcray LRPF Alison Lundergan Grimes Kentucky Secretary of State Received and Filed: 6/19/2014 11:15 AM Fee Receipt: \$130.00			
Alison Lundergan Grimes Secretary of State P. O. Box 718 Frankfort, KY 40602-0718 (502) 564-3490 http://www.sos.ky.gov	Reinstatem	Reinstatement Application and Reinstatement Annual Report For the years 2013 through 2014			RST	
Exact limited liability company name and principal office address AQUA FIT SERVICES, LLC 497 HARMONY LANE ALEXANDRIA KY 41001			The principal office address and registered agent name/office address cannot be changed on this form. When reinstating, you cannot modify the addresses until the reinstatement is filed. Once the reinstatement is filed, the statement of change can be filed online at <u>app.sos.ky.gov/ftsearch</u> or can be downloaded from our website.			
Registered Agent and Registered FBT LLC 400 WEST MARKET STRE 32ND FLOOR LOUISVILLE, KY 40202 Managers - List the name and address of the	ET	s. If not specified, address	es default to the 11 C's princ	cinal office	address	
Dorg Launez	<u> </u>	i-mony lin	Alexandria	Kt	4/67/	

The above entity was administratively dissolved on September 28, 2013 because the entity did not file its annual report for the year 2013. The undersigned states that the grounds for dissolution either did not exist or have been eliminated, and the entity's name satisfies the requirements of KRS 275.295. Enclosed is a check in the amount of \$130.00, payable to Kentucky State Treasurer.

Under penalty of perjury, the below signed hereby authorizes the Kentucky Department of Revenue to release any applicable tax information pertaining to AQUA FIT SERVICES, LLC to the Secretary of State, as required for reinstatement pursuant to KRS 271B.14-220.

If not an officer of said entity, please provide a Declaration of Power of Attorney with the Reinstatement Application.

Parthen Title (Required) X 4/28/14 Signature of member or manager (Required)



THOMAS B. MILLER Commissioner

FINANCE AND ADMINISTRATION CABINET DEPARTMENT OF REVENUE OFFICE OF INCOME TAXATION

ELYSE WEIGEL Deputy Commissioner

BOB BROOKS Executive Director

June 19, 2014

AQUA FIT SERVICES, LLC 497 HARMONY LANE ALEXANDRIA KY 41001

Re: Request for a Letter of Good Standing

The Department of Revenue records indicate **AQUA FIT SERVICES**, **LLC** has filed Kentucky Income Tax Returns through the tax year ended 12/31/2013, and has paid the taxes shown to be due or assessed as of the date of this letter. The Department of Revenue requests the company's charter be reinstated provided all other requirements of the Secretary of State have been met by the limited liability company. This letter is valid for 30 days from the date of this letter.

Sincerely,

Nicole REVX129, Taxpayer Services Specialist II Division of Corporation Tax 501 High Street, Mail Sta. 52 Frankfort, KY 40601 502-564-2062 FAX# 502-564-0058

Kentucky Secretary of State organization number 0757553

